MERCER

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North Carolina Division of Mental Health, Developmental Disabilities, Substance Abuse Services Technical Assistance for Local Management Entity (LME) Southeastern Regional MH/DD/SA Services

Operational category	Meets expectations	Needs improvement
Financial and business management operations		
Separate staffing for Finance, IT and claims including dedicated staff for help desk functions		X
Current year's business plan identifies financial history, goals and budget as well as future goals and strategies	X	
Audited financial statements provided and are without concerns or qualified opinions	X	
Detailed general ledger reports balance to the audited financial statements and other financial reports	X	
Cost allocation methodologies are consistent with generally accepted accounting principles	X	
Financial reports exist which identify claims lag and outstanding provider payments	X	
Average administrative expense per individual served exceeds the average for all LMEs	X	
Average salary per FTE exceeds the average for all LMEs	X	
Average individuals served per FTE is less than the average for all LMEs	X	
Average hospital utilization per individual served exceeds the average for all LMEs	X	
Average medical claim expense per claim processed exceeds the average for all LMEs	X	

Operational category	Meets expectations	Needs improvement
Information technology and claims systems		
Recipient's other insurance data is identified and system edits are in place to prevent claims from being paid when other insurance exists		X
LME provided high dollar service code and provider payment reports as requested or demonstrated capability during on-site review	X	
IS project planning identifies upcoming system software and hardware changes and include associated costs and timeframes	X	
Systems receive, validate and process electronic claims data		X
Systems create, validate and process electronic encounter data	X	
Systems create, validate and process electronic remittance advice when requested by providers		X
Systems receive, validate and process electronic eligibility data and provide information electronically to providers		X
Providers have the ability to submit authorization information electronically	X	
Industry standard codes are submitted by providers and used in claims adjudication	X	
Claims quality audit is performed consistent with industry standards		X
Fee schedules are iterative and date sensitive	X	
Systematic edits verify eligibility, authorization, provider and recipient information during claims adjudication		X
Claims systems provide financial and encounter adjustments and track historical information	X	
Appropriate system backups and disaster recovery plans are in place and tested regularly		X
System maintenance includes user involvement and sign off during testing and production implementation		X
Clinical operations and governance		
Divestiture		
If LME provides direct services, separates LME system management functions from service delivery functions		X
If LME provides direct care/clinical services, includes one manager for LME management services reporting to LME Director or Board and second manager for clinical reporting to LME Director or Board		X

Operational category	Meets expectations	Needs improvement
Utilization management functions		
UM/UR committee	X	
Medical Director Psychiatrist	X	
UM/UR manager (licensed clinician)	X	
Includes authorization of bed days at state hospitals	X	
Strategies/tracking of over and under-utilization addressed	X	
Crisis services		
P&P for handling of emergency calls include all of the following: Behavioral indicators of emergency (crying, shouting, etc.) Scripted questions for STR staff to screen consumers for emergency so staff do not make clinical judgment Emergency call not transferred telephonically or call put on hold-STR staff stays on line Physician available for crisis consultation 24/7 Staff other than the one taking the call to contact 911 or other crisis services LME clinician provides follow up until case is stabilized		X
Includes face-to-face capability	X	
Community involvement		
Addresses consumer involvement in LME/stakeholder input	X	
Performance monitoring and measures		
Emergency care (face-to-face) provided within two hours. Met standard (85% of cases met time requirement) over the six-month period	X	
Over/under utilization analysis with trending and action plans		X
Provider relations and support		
Provider community development plan/network development plan	X	
Network adequacy assessments		X

Operational category	Meets expectations	Needs improvement
Quality management		
Supervision/quality review process for assessing consumer calls includes:		
Supervision by master's level licensed clinician	X	
Live call monitoring with comparison to performance standards		X
Documentation audits with feedback		X